

# Provider Confidence of Admission Medication Reconciliation: Questions in Accuracy and Equity

Alexandra Diaz-Barbe, Emma D He, Misha Tran MD MS, Matthew T Cerasale MD MPH  
 Section of Hospital Medicine, University of Chicago

**BACKGROUND**

- Improving the medication reconciliation process is critical in ensuring the safety of hospitalized patients.
- As part of implementing a best practice medication history, documentation of the level of confidence in an admission medication reconciliation was added to the history and physicals of our hospital medicine group.

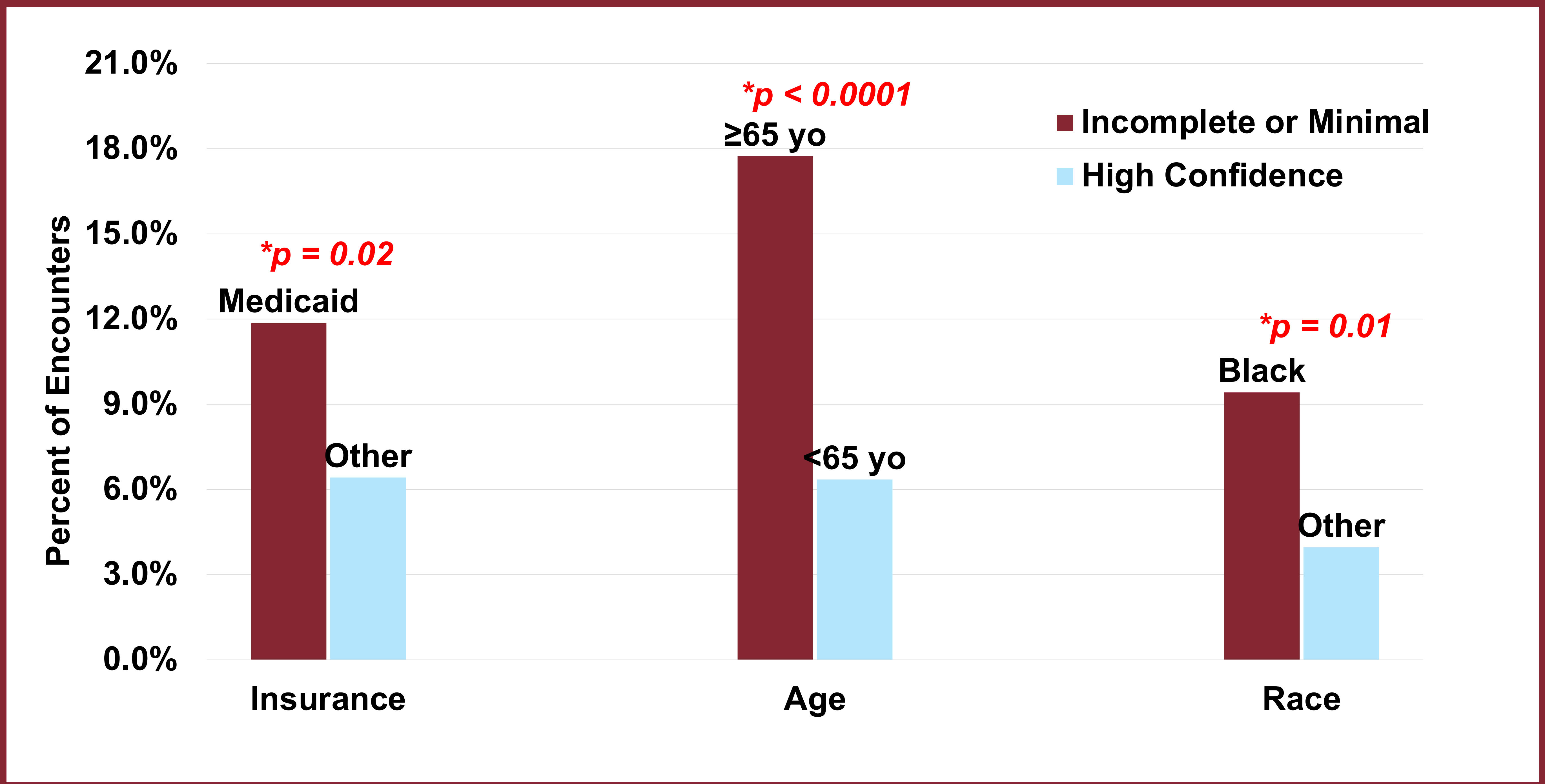
**OBJECTIVES**

- To identify patients that would need additional time spent on the medication reconciliation later in the encounter and to potentially flag for review by pharmacy.
- To determine if any patient factors were associated with: (1) confidence in reconciliations and (2) accuracy of the medication list.

**METHODS**

- The study was completed at a large, urban, academic tertiary referral center with a large hospital medicine group.
- Demographics of patient encounters plus medication reconciliation confidence (high, low, incomplete) were obtained for all hospital medicine admissions from 12/31/22 through 2/19/2023.
- A random sample of approximately 60 high confidence and 60 low confidence/incomplete reconciliations were analyzed.
- Chi-squared analyses were done to compare the demographics of patients who had high confidence med recs vs. those who had low confidence/incomplete med recs.

## Patient Factors by Med Rec Confidence



***\*Medication Reconciliations Designated as Minimal Confidence or Incomplete were More Likely to belong to Black Elderly Patients on Medicaid\****

**RESULTS**

- A total of 811 encounters with history and physicals written by the hospital medicine team were completed during the study period. Medication reconciliations were noted as high confidence in 92.0% of encounters, compared to 3.2% for low confidence, and 4.7% for incomplete.
- Of the random sample from chart review, 57 high confidence and 53 low confidence/incomplete were included in the analysis.
- Over half of the low confidence/incomplete cases had medication changes that were unaccounted for in the note, while this was true only for 35.1% of high confidence med recs.
- In low confidence/incomplete cases, 75% had “possible inaccurate medications” on their medication list at discharge, while this was true for 54% of high confidence cases.

**CONCLUSION**

- Medication reconciliations were unlikely to be updated during hospitalization, regardless of provider confidence. Low confidence/incomplete medication reconciliations were more likely to be inaccurate, but a third to half of high confidence reconciliations also likely had errors.
- Additional resources for medication reconciliation should be considered for all hospital medicine patients, with particular focus on Black elderly patients on Medicaid.